AMENDMENT TRANSMITTAL LETTER					Docket No. 341148004US2	
Application No. 10/722,015-Conf. #7001		Filing Date November 25, 2003		Examine		
				M. T. Rozar	ski 3768	
Applicant(s): Mat	te et al.					
Invention: GUIDE		THERAPY SY		D DATENTO		
Transmitted here The fee has been	with is an ame	ndment in the	above-identif	ied application.		
			S AS AMENI			
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	10	- 26 =	0	x 26.00	0.00	
Independent Claims	7	- 14 =	0	x 110.00	0.00	
	dent Claims (ch	eck if applicabl	e)		1	
Other fee (please specify): Extension for response within first month Terminal Disclaimer					65.00 70.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					135.00	
Large Entity	•			x Small Entity	1	
No additiona	al fee is require	d for this ame	ndment.			
Please char	ge Deposit Acc	ount No	ir	n the amount of \$	·	
A check in t	he amount of \$		to cover	the filing fee is end	closed.	
				nt of \$135.00 is he		
X The Director		orized to char	ge and credit	Deposit Account N	No50-0665	
x Credit a	ny overpaymer	nt.				
X Charge	any additional fl	ing or applicatio	on processing t	fees required under	37 CFR 1.16 and 1.17	
Susan D. Betch Attorney/Agent		498)		Dated:	April 30, 2009	
PERKINS COII P.O. Box 1247 Seattle, Washii (206) 359-8000	ngton 98111-1	247				
(200) 339-0000	,					